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 TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/755,479
		Filing Date	01/13/2004
		First Named Inventor	Heinrich LYSEN
		Group Art Unit	2859
		Examiner Name	Tania C. Courson
Total Number of Pages in This Submission	27	Attorney Docket Number	741124-110

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

ENCLOSURES (*check all that apply*)

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| <input type="checkbox"/> Fee Transmittal Form
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<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
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<input checked="" type="checkbox"/> Second Information Disclosure Statement, Form PTO-1449, Three Cited References
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (<i>for an Application</i>)
<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Declaration and Power of Attorney
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
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<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address
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<input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures
<input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt
<input type="checkbox"/> Other Enclosure(s) (<i>please identify below:</i>) |
|---|--|---|

Remarks

The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	David S. Safran, Reg. No. 27,997 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	July 15, 2004

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

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Docket No. 741124-110

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Heinrich LYSEN) Examiner: Tania C. Courson
Serial No. 10/755,479) Group Art Unit: 2859
Filed: 01-13-2004)
For: PROCESS AND MEASUREMENT)
DEVICE FOR DETERMINING THE)
ALIGNMENT OF A CYLINDRICAL)
BODY)

SECOND INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In accordance with the duty of disclosure as set forth in 37 C.F.R. §1.56, Applicants hereby submit the following information in conformance with 37 C.F.R. §§ 1.97 and 1.98. Pursuant to 37 C.F.R. § 1.98, a copy of each of the foreign documents cited is enclosed.

The documents are being submitted within three (3) months of the filing of this application or entry into the national stage of this application, or before the first Office Action on the merits, whichever is later, therefore no fee or certification is required under 37 C.F.R. § 1.97(b).

It is requested that the accompanying PTO-1449 be considered and made of record in the above-identified application. To assist the Examiner, the documents are listed on the attached form PTO-1449. It is respectfully requested that an Examiner initial a copy of this form be returned to the undersigned.

The Commissioner is hereby authorized to charge any fees connected with this filing which may be required now, or credit any overpayment to Deposit Account No. 19-2380.

Respectfully submitted,

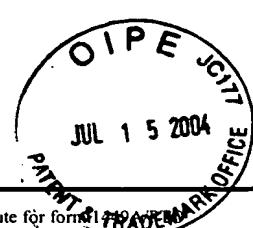
By:



David S. Safran
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NVA300754.1



Substitute for form 1409 INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				<i>Complete if Known</i>	
Sheet	1	of	1	Application Number	10/755,479
				Filing Date	01-13-2004
				First Named Inventor	Heinrich LYSEN
				Art Unit	2859
				Examiner Name	Tania C. Courson
				Attorney Docket Number	741124-110

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	U.S. Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code ² (<i>if known</i>)			
		US-3,604,121	09-14-1971	Hull	
		US-			

FOREIGN PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Country Code ³ Number ⁴ <i>(if known)</i> Kind Code ⁵ <i>(if known)</i>			
		WO 99/64818	12-16-1999	Schyns et al.	AB
		DE 696 19 549 T2	07-03-1997	Schyns et al.	AB
		DE 689 06 184 T2	09-06-1989	Fowler	AB

OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS					
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T ²

Examiner Signature	Date Considered
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.